

**ISSUE SLIP STAMP** (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MCS		7-10
O.I.P.E. CLASSIFIER		49	12/14/98
FORMALITY REVIEW	SMU	10622	12-22-98

**BEST AVAILABLE COPY**

**INDEX OF CLAIMS**

Rejected  
Allowed  
Cancelled  
Restricted

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Non-elected  
Interference  
Appeal  
Objected

Claim	Date
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here